		Complete if Known				
Substitute for form 1449A/PTO INFORMATION DISCLOSURE				Complete if Known		
				Application Number	10/678,299	
				Filing Date	October 6, 2003	
		First Named Inventor	Shunpei YAMAZAKI et al.			
		Art Unit	2811			
		Examiner Name	Samuel A. Gebremariam			
Sheet	1		1	Attorney Docket Number	740756-2662	

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Examiner Initials	Cite No.1	U.S. Patent Document Number - Kind Code ³ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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			-			
NAME AND ADDRESS OF THE OWNER, WHEN						

Examiner Signature	Samuel Gebremariam/	Date Considered	12/19/2010	

^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.